PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where in m

appropriate. All further indicated unless correcte maintenance fee notifica	ed below or directed oth	g the Patent, advance of erwise in Block 1, by (a	rders and notification of n i) specifying a new corres	pondence address; at	of mailed to	icating a sepa	rate "FEE ADDRESS"	for
		ock i for any change of address)	Fee(pape	s) Transmittal. This c	ertificate can aper, such as	not be used for an assignmen	r domestic mailings of or any other accompan nt or formal drawing, r	ying
ATTN: IBM37	7590 04/11. YNES & VICTOF EVERLY DRIVE, SI	R, LLP.	State addr	Certificate of Mailing or Transmission by certify that this Fee(s) Transmittal is being deposited with the United Postal Service with sufficient postage for first class mail in an envelope ssed to the Mail Stop ISSUE FEE address above, or being facsimile nitted to the USPTO (571) 273-2885, on the date indicated below.				
BEVERLY HIL	LS, CA 90212		-		(Depositor's name)			
							(Signa	nire)
							a	Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR ATTORNEY DOCKET NO.		OCKET NO.	CONFIRMATION NO.		
10/766,576	01/27/2004		David Maxwell Cannon SJO920030087US			087US1	3882	
			STORING DATA FOR RE					· · · · · ·
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F		L FEE(S) DUE		
nonprovisional	NO	\$1440	\$300	\$ ⁰ 07/14/	97/14/2008 AUONDAF2 006		07/11/2008 0045 090466 10	766576
EXAM		ART UNIT	CLASS-SUBCLASS	01 fC:	:1501	1449.08	DA	
	MERILYN P ence address or indicatio	2163	707-204000 2. For printing on the p	02 FC:	1504	300.60	DA	
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent atto- listed, no name will be	vely, e firm (having as a m agent) and the names meys or agents. If no	embera of up to	1Willia 2Konsac 3	. 0 - 3.15	100 110 110
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI	less an assignee is ident th in 37 CFR 3.11. Comp GNEE	ified below, no assignee pletion of this form is NO	THE PATENT (print or type data will appear on the port a substitute for filing and (B) RESIDENCE: (CITY MINES COTPA	atent. If an assignee assignment. 7 and STATE OR CO	UNTRY)	below, the d		d for
			rinted on the patent):	•	oration or ot	her private gro	oup entity Governs	ment
4a. The following fee(s) See Issue Fee	are submitted:	b. Payment of Fee(s): (Ples A check is enclosed. Payment by credit can The Director is hereby	ase first reapply any rd. Form PTO-2038 i	previously	paid issue fee	shown above)		
a. Applicant clain	atus (from status indicate	us. See 37 CFR 1.27.	b. Applicant is no lon					
NOTE: The Issue Fee ar	nd Publication Fee if req records of the Waited St	uired) will not be acceptones.	ed from anyone other than t k Office.	the applicant; a regist	ered attorney	or agent; or t	he assignee or other par	rty in
Authorized Signature	1.1111111	Land		Date	19/0	8		
Typed or printed nam	ne William	K. Konrad		Registration No.	28,	868		
an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, Alexandria, Virginia 22:	ntiality is governed by 35 application form to the tions for reducing this but Virginia 22313-1450. DX 313-1450.	5 U.S.C. 122 and 37 CFR e USPTO. Time will var irden, should be sent to to O NOT SEND FEES OR	on is required to obtain or 1.14. This collection is es y depending upon the indital the Chief Information Offic COMPLETED FORMS To espond to a collection of indital control of the collection of the collecti	timated to take 12 mi vidual case. Any com er, U.S. Patent and Ti O THIS ADDRESS.	nutes to com ments on the rademark Off SEND TO: C	e amount of ti fice, U.S. Dep Commissioner	me you require to compartment of Commerce, for Patents, P.O. Box	, and

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notificatio	as.										
CURRENT CORRESPONDEN	Fee pap	(s) Transmittal. This	certificate paper, suc	e cannot be used for the as an assignment	domestic mailings of the ar any other accompanying at or formal drawing, must						
46917 7.	46917 7590 04/11/2008										
KONRAD RAY	NES & VICTOR	R T.I.P.	. The	Certify that this	Bee(s) Tr	Mailing or Transt	nission denocited with the United				
ATTN: IBM37	1120 00 110101	·, DDI ·	Sta	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile							
315 SOUTH BEV	ERI Y DRIVE SI	UTTE 210	add	bressed to the Mail	Stop ISSU	JE FEE address	above, or being facsimile				
BEVERLY HILL	·	0112270	ר	transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's regr							
			-	•	. •		(Signature)				
			 -				(Date)				
APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	2	ATTORNEY DOCKET NO.		CONFIRMATION NO.					
10/766,576			David Maxwell Cannon	SJO920030087US1		3882					
TITLE OF INVENTION:)	METHOD, SYSTEM,	AND PROGRAM FOR S	STORING DATA FOR RI	ETRIEVAL AND TR	ANSFER						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	OTAL FEE(S) DUE	DATE DUE				
nonprovisional	NO	\$1440	\$300	\$0		\$1740	07/11/2008				
EXAMIN	ièr	ART UNIT	CLASS-SUBCLASS								
NGUYEN, ME	ERILYN P	2163	707-204000								
1. Change of corresponden	ce address or indication	n of "Fee Address" (37	2. For printing on the	patent front page, list		1. 1:47.	V V call				
CFR 1.363).			(1) the names of up t		attorneys	17011110	m K. Konrad				
Change of correspon Address form PTO/SB/	idence address (or Cha	nge of Correspondence		or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 Kanrad Raynes & Victor							
-	•	n 9 - 4141 C	(2) the name of a sing	te firm (having as a	member a		Kaynest Vicio				
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	ation (or "Fee Address or more recent) attach	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.									
2 APPLICATED MARKE AND	D DECIDENCE DATA	TO DE DRIMTED ON	THE DATENT (orint or to)							
3. ASSIGNEE NAME AND PLEASE NOTE: Unles				• •	e is identi	ified below, the de	ocument has been filed for				
(A) NAME OF ASSIGN		pietion of this form is NU	(B) RESIDENCE: (CIT								
Internation	onal Busi	iness Mad	hines Corp	oration	4	rmonk	., NY				
							up entity Government				
4a. The following fee(s) are											
Issue Fee	Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.										
Publication Fee (No	emall entity discount a	Payment by credit card. Form PTO-2038 is attached.									
Advance Order - #		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 1- 24 616 (enclose an extra copy of this form).									
			overpayment, to Dep	osit Account Numbe	<u>09-0</u>	Glolo (enclose a	n extra copy of this form).				
 Change in Entity Statu a. Applicant claims 			b. Applicant is no lo	nger claiming SMAL	L ENTIT	Y status. See 37 Cl	FR 1.27(g)(2).				
			ed from anyone other than	the applicant; a regis	tered attor	rney or agent; or th	e assignee or other party in				
interest as shown by die te	1.111111	1, ()		7	10	110					
Authorized Signature _	Marin	gong		Date/	19/	08					
Typed or printed name		K. Konrad		Registration N		3,868					
	ality is governed by 35 application form to the ns for reducing this burginia 22313-1450. DO 3-1450.	U.S.C. 122 and 37 CFR e USPTO. Time will var rden, should be sent to to NOT SEND FEES OR	1.14. Inis collection is e the chief information offic COMPLETED FORMS	stimated to take 12 n ividual case. Any co cer, U.S. Patent and TO THIS ADDRESS	mments or Frademark SEND To	omplete, including the amount of the Office, U.S. Dep. O: Commissioner	by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, number.				